

07-13-00

A

07/12/00
jc862 U.S. PTO

jc490 U.S. PTO
09/614790
07/12/00

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new non-provisional applications under 37CFR§1.53(b))</small>		Attorney Docket No.	HME/7982.001	
		First Inventor or Application Identifier		Sharon F. Kleyne
		Title	METHOD AND KIT FOR MOISTURIZING THE SURFACE OF THE EYE	
		Express Mail Label No.	EL619333956US	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
--	---

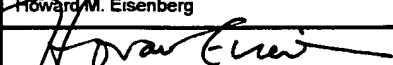
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification Total pages 14 <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive Title of the Invention- Cross References to Related Applications- Statement Regarding Federally Sponsored Research- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure		6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer readable copyb. <input type="checkbox"/> Paper copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Pages] 1		ACCOMPANYING APPLICATION PARTS 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney when there is an assignee 9. <input type="checkbox"/> English translation document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO 1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 13. <input checked="" type="checkbox"/> *Small Entity Statements <input type="checkbox"/> Statement filed in prior application. Status still proper and desired. (PTO/sb/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other	
4. Oath or Declaration [Total Pages] 2 <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.53(d)(2) and 1.33(b)			
<small>* Note for Items 1 & 13: In order to be entitled to pay small entity fees, a small entity statement is required (37 CFR §1.27), except if one filed in a prior application is relied upon (37 CFR §1.28)</small>			

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Group No./Art Unit _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS							
<input type="checkbox"/> Customer Number or Bar Code Label				(Insert customer number or attach bar code label here)		or <input checked="" type="checkbox"/> Correspondence address below	
Name		Chernoff, Vilnauer, McClung & Stenzel, LLP					
Address		601 S.W. Second Avenue, Suite 1600					
City		Portland		State		Oregon	
Country		U.S.A.		Telephone		(503) 227-5631	
				FAX		(503) 228-4373	
Name (print type)		Howard M. Eisenberg			Registration No. (Attorney/Agent)		36,789
Signature					Date		July 12, 2000

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

Application Number Complete if Known
Filing Date July 12, 2000
First Named Inventor Sharon F. Kleyne
Examiner Name
Group/ Art Unit
Attorney Docket No. HME /7982.001

TOTAL AMOUNT OF PAYMENT \$411

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge the indicated fees and credit any over payments to:

Deposit Account Number 03-1550
Deposit Account Name Chernoff Vilhauer McClung & Stenzel
☒ Charge any additional fee required under 37 CFR 1.16 & 1.17

2. ☒ Payment Enclosed

☒ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		101	690	201	345	Utility filing fee	345
		106	310	206	155	Design filing fee	
		107	480	207	240	Plant filing fee	
		108	690	208	345	Reissue filing fee	
		114	150	214	75	Provisional filing fee	

SUBTOTAL (1) \$345

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
23	-20* = 3	X 9 = 27	
4	-3* = 1	X 39 = 39	
Multiple Dependent			

*or number of previously paid, if greater. For reissues, see below.

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
		103	18	203	9	Claims in excess of 20
		102	78	202	39	Independent claims in excess of 3
		104	260	204	130	Multiple dependent claim, if not paid
		109	78	209	39	*Reissue independent claims over original patent
		110	18	210	9	*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$66

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		105	130	205		65 Surcharge - late filing fee or oath	
		127	50	227		25 Surcharge-late provisional filing fee or cover sheet	
		139	130	139		130 Non-English specification	
		147	2,520	147		2,520 For filing a request for reexamination	
		112	920*	112		920* Requesting publication of SIR prior to Examiner action	
		113	1840*	113		1840* Requesting publication of SIR after Examiner action	
		115	110	215		55 Extension for reply within first month	
		116	380	216		190 Extension for reply within second month	
		117	870	217		435 Extension for reply within third month	
		118	1,360	218		680 Extension for reply within fourth month	
		128	1,850	228		925 Extension for reply within fifth month	
		119	300	219		150 Notice of Appeal	
		120	300	220		150 Filing a brief in support of an appeal	
		121	260	221		130 Request for oral hearing	
		138	1,510	138		1,510 Petition to institute a public use proceeding	
		140	110	240		55 Petition to revive - unavoidable	
		141	1,210	241		605 Petition to revive - unintentional	
		142	1,210	242		605 Utility issue fee (or reissue)	
		143	430	243		215 Design issue fee	
		144	580	244		290 Plant issue fee	
		122	130	122		130 Petitions to the Commissioner	
		123	50	123		50 Petitions related to provisional applications	
		126	240	126		240 Submission of Information Disclosure Statement	
		561	40	581		40 Recording each patent assignment per property (times number of properties)	
		146	690	246		345 Filing a submission after final rejection (37 C.F.R. 1.129(a))	
		149	690	249		345 For each additional invention to be examined (37 C.F.R. 1.129(b))	

Other (specify)

Other (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$0

SUBMITTED BY

Name (print type) Howard M. Eisenberg

Signature

Howard Eisenberg

Registration No. 36,789

Complete (if applicable)

Telephone (503) 227-5631

Date July 12, 2000

CERTIFICATE OF MAILING

BY "EXPRESS MAIL"

Express Mail No.: EL619333956US

Date of Deposit : July 12, 2000

I hereby certify that the utility patent application attached hereto entitled METHOD AND KIT FOR MOISTURIZING THE SURFACE OF THE EYE, Sharon F. Kleyne, inventor(s), together with Fee Transmittal form (duplicate), Utility Patent Application Transmittal form (duplicate), Declaration, Power of Attorney, Small Entity Statement, Assignment and cover sheet, and the required fees, is being deposited with the United States Postal Service "Express Mail to Addressee" on the date indicated above and is addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231.


Dwight Berquist-Moody

003420 "054400"